

Docket No. 1232-5101

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): SONODA et al.

Group Art Unit: 3653

Serial No.: 10/

10/643,698

Examiner:

Matthew J. KOHNER

Filed:

August 18, 2003

For:

AUTOMATIC FEEDING DEVICE AND RECORDING APPARATUS PROVIDED

WITH SUCH AUTOMATIC FEEDING DEVICE

EXPRESS MAIL CERTIFICATE

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Express Mail Label No.: EV 622 501 067US

Date of Deposit: October 11, 2005

I hereby certify that the following attached paper(s) and/or fee

- 1. Amendment under 37 CFR 1.111;
- 2. Amendment Fee Transmittal;
- 3. Return postcard

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Susan Shen-Frattura

(Typed or printed name of person mailing papers(s) and/or fee)

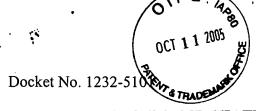
(Signature of person mailing paper(s) and/or fee)

Correspondence Address:

MORGAN & FINNEGAN, L.L.P. 3 World Financial Center New York, NY 10281-2101 (212) 415-8700 Telephone (212) 415-8701 Facsimile

27123

↑CUSTOMER NUMBER↑



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): SONODA et al.

Group Art Unit:

3653

Serial No.:

10/643,698

Examiner:

Matthew J. KOHNER

Filed:

August 18, 2003

For:

AUTOMATIC FEEDING DEVICE AND RECORDING APPARATUS PROVIDED

WITH SUCH AUTOMATIC FEEDING DEVICE

AMENDMENT FEE TRANSMITTAL

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for the above-identified application.

| | No | additional | fee | is | required. |
|--|----|------------|-----|----|-----------|
|--|----|------------|-----|----|-----------|

The additional fee has been calculated as shown below:

CLAIMS AS AMENDED

| | Claims Remaining After Amendment | Highest No. Covered by Previous Payments | Extra | Rate | Additional Fee | |
|---------------|---|---|-------|-------------------|-------------------|--|
| Total Claims* | | | | \$50.00/ \$25.00 | \$ | |
| Independent | | | | | | |
| Claims | | | | \$200.00/\$100.00 | \$ | |
| | (If claims added by amendment include Multiple Dependent | | | | | |
| Multiple | Claim(s) and there was no Multiple Dependent Claim(s) in | | | | | |
| Dependent | application before amendment add \$360.00 to additional fee | | | | | |
| Claims | (\$180.00 for s | \$ 360 | | | | |
| | | | | TOTAL | \$ 360 | |

^{*}Includes all independent and single dependent claims and all claims referred to in multiple dependent claims. See 37 C.F.R. §1.75(c).

Docket No. <u>1232-5101</u> Serial No. <u>10/643,698</u>

| Small entity status is or has been claimed. Reduced Fees Under 37 C.F.R. §1.9(f) paid herewith \$ | | | | | |
|---|---|--|--|--|--|
| Pages Sequence Listing | | | | | |
| Computer disk(s) containing substitute Sequence Listing | | | | | |
| Statement under 37 C.F.R. §1.825(b) that the computer and paper copies of the substitute Sequence Listing are the same. | | | | | |
| A check in the amount of \$ to cover the filing fee is attached. | | | | | |
| Charge fee to Deposit Account No. 13-4500, Order No. 1232-5101. A DUPLICATE COPY OF THIS SHEET IS ATTACHED. | | | | | |
| The Commissioner is hereby authorized to charge any additional fees which may be required for filing this amendment, including all fees pursuant to 37 CFR §1.17 for its timely consideration, or credit any overpayment to Deposit Account No. 13-4500, Order No. 1232-5101. A DUPLICATE COPY OF THIS SHEET IS ATTACHED. | | | | | |
| | Respectfully submitted, MORGAN & FINNEGAN, L.L.P. | | | | |
| October 11, 2005 By: | Joseph D. Eng, Jr. Registration No. 54,084 | | | | |
| | Pages Sequence Listing Computer disk(s) containing subs Statement under 37 C.F.R. §1.825(b) that Sequence Listing are the same. A check in the amount of \$ to cove Charge fee to Deposit Account No. 13-45 COPY OF THIS SHEET IS ATTACHED The Commissioner is hereby authorized trequired for filing this amendment, includingly consideration, or credit any overpand. No. 1232-5101. A DUPLICATE COPY | | | | |

Correspondence Address:

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